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FEC FORM 3X

Only

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED

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F. I. R. S. T. C. O. M. M. O. N. M. E. A. L. T. H. P. I. N. A. N. C. I. A. L. C. O. R. P. O. R. A. T. I. O. N. P. A. C. T. E. L. C. O. R. P. O. R. A. T. I. O. N. P. A. C. T. E. L. L. C. O. R. P. O. R. A. T. I. O. N. P. A. C. T. E. L. L. C. O. R. P. O. R. A. T. I. O. N. P. A. C. T. E. L. L. C. O. R. P. O. R. A. T. I. O. N. P. A. C. T. T. E. L. L. C. O. R. P. O. R. A. T. I. O. N. P. A. C. T. T. E. L. L. L. C. O. R. P. O. R. A. T. I. O. N. P. A. C. T. T. E. L. L. L. C. O. R. P. O. R. A. T. I. I. O. N. P. A. C. T. T. I. I. O. N. P. A. C. T. T. I. I. O. N. P. A. C. T. T. I.	1.	NAME OF COMMITTEE (in full)	TYPE OR I	PRINT ¥		mple: If typing the lines.	g, type	1ŽFĚ4MS	<u></u>		
ADDRESS (number and street) P O B O X 4 0 0	F	I R S T COMM	O _I N _I W _I E _I	A L T H	FINF	NCILA	L CO	RPOR	A _I T _I I _I O	N ₁	PAC
CITY A STATE A ZIP CODE A 2. FEC IDENTIFICATION NUMBER V CITY A STATE A ZIP CODE A 3. IS THIS REPORT (N) OR (A) 4. TYPE OF REPORT (Choose One) (a) Cuarterly Report (Choose One) (b) Monthly Report (Choose One) (c) Quarterly Report (C1) (d) Quarterly Report (C1) (d) Quarterly Report (C2) (e) 12-Day PRE-Election Report (FR) (fr) July 31 Mid-Year Report (C3) (o) January 31 panuary 31 prot (Non-election Year Only) (MY) Termination Report (C1) (d) 30-Day POST-Election Report for the: (e) 12-Day POST-Election Report (O2) (f) 20 1 3 through 1 2 (3 1) (2 0 1 3 through 1 2 (3 1) (3 1) (3 1) (3 1) (3 1) (3 1) (3 1) (3 1) (3 1) (3 1) (3 1) (3 1) (3 1) (3 1) (3 1) (3 1) (3 1) (3 1) (3	T	eresa Mc	i _a m _i b _i	o, t, t, i,							
than previously reported. (ACC) 2. FEC IDENTIFICATION NUMBER V CITY A STATE A ZIP CODE A 3. IS THIS NEW (N) OR (A) 4. TYPE OF REPORT (b) Monthly Report (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) Quarterly Report (Q2) Quarterly Report (Q3) January 31 Vear-End Report (VE) July 31 Mid-Year Report (No) Report for the: Covering Period (d) 30-Day Report for the: Election on Election o	ADI ▼	DRESS (number and street)	POLL	B 0 x 4	0 0 1	111-					
2. FEC IDENTIFICATION NUMBER 3. IS THIS REPORT		than previously					<u> </u>		1570	11 1	
3. IS THIS REPORT (N) OR AMENDED (A) ATYPE OF REPORT (Choose One) (B) Monthly Report (Choose One) (C) O O O O O O O O O O O O O O O O O O O		reported. (ACC)		1 a n a		 	ا لــــا	ا لثث	1,3,7,0		
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(Choose One) Report Due On:		C 0 0 3 4 8 1	8 5	3.				11 11	IENDED		·
(a) Quarterly Reparts: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) Termination Report Election on Report for the: Repor	4.		Rep	ort 🖳							ear Only) Dec 20 (M12)
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Quarterly Report (Q2) Quarterly Report (Q2) Quarterly Report (Q3) Quarterly Report (YE) Quarterly Post (YE) Quarterly			Q1) (c)		,p. 20 (M-1)			<u> </u>			
Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Report (Non-election Year Only) (MY) Termination Report (TER) General (30G) Runoff (30R) Special (30S) Covering Period Certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Teresa M. Ciambotti NOTE: Submission of false, exoneous, or incomplete information may sobject the person signing this Report to the penalties of 2 U.S.C. §437g. Office I to the penalties of 2 U.S.C. §437g.		Quarterly Report (Q2)	PRE-Election				Special (12S)	- 의	
Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) POST-Election General (30G) Report (Non-election Year Only) (MY) POST-Election General (30G) Report for the: Election on In the State of State of Covering Period Termination Report In the State of Termination Report In the State of Covering Period Termination Report In the State of Termina		Quarterly Report (Q3)		(2000)	\ <u> </u>	ا راسما	ᠰ᠘ᠰᡯ] in	the	
Report (Non-election Year Only) (MY) Termination Report (TER) Report for the: Election on Election on Termination Report General (30G) Runoff (30R) Special (30S) Report for the: Election on Felority that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Teresa M. Ciambotti Signature of Treasurer Date FEC FORM 3X FEC FORM 3X		Year-End Report (YE)	Elec	ction on				S	ate of	
Termination Report (TER) Election on Election on Election on In the State of Tovering Period Tovering		Report (Non-election	on (d)	POST-Election	إلىا	General (30G)	Runoff (3	0R)	s	pecial (30S)
Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. FEC FORM 3X			·	·			ا (مرم	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	13		
Type or Print Name of Treasurer Teresa M. Ciambotti Signature of Treasurer Date Date Date Office Lise Office Lise FEC FORM 3X	 5.	If _			1 3	through		/ [8] / 3 1	2 0 1	3	
Signature of Treasurer Date Date Date Date Date Diffice Office Diffice Diff	CE	ertify that I have examined t	his Report a	nd to the best	of my know	wledge and b	elief it is true	e, correct and	d complete.		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. Office Lise FEC FORM 3X	Тур	e or Print Name of Treasure	er Teres	a M. Ciam	botti						
Office Lise FEC FORM 3X	Sig	nature of Treasurer	_ oresu	· Ciam	Statte		Da	ate O	30) ' [<u>6</u>	1014
Office Lise FEC FORM 3X	NO.	TE: Submission of false, erro	neous, or inc	omplete informa	ution may so	bject the pers	on signing thi	s Report to th	ne penalties	of 2 U.:	S.C. §437g.
	 !	Office						_	FEC F	ORN	3X .

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name FIRST COMMONWEALTH FINANCIAL CORPORATION PAC Report Covering the Period: From: **COLUMN A** COLUMN B This Period Calendar Year-to-Date (a) Cash on Hand January 1, (b) Cash on Hand at 1, 9, 1, 00 Beginning of Reporting Period..... 3,9,0 11,654. (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... Total Disbursements (from Line 31)...... Cash on Hand at Close of Reporting Period 5,881. 5, 8, 8, 1 (subtract Line 7 from Line 6(d))..... 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

FE6AN026

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name FIRST COMMONWEALTH FINANCIAL CORPORATION PAC 0 7 0 1 1 2 2 0 1 3 ∄3 1 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 2, 2, 3, 9, 7, 5 7,089.75 (i) Itemized (use Schedule A)..... 1, 1, 5, 0, 3, 2 4, 5, 6, 5, 2, 2 (ii) Uniternized (iii) TOTAL (add 11,654,97 3, 3, 9, 0, 07 Lines 11(a)(i) and (ii).....▶ 0.000_.0 0 (b) Political Party Committees (c) Other Political Committees 0.0000.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 3, 3, 9, 0, 0, 0, 7 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.000.00Party Committees..... 0.000.0013. All Loans Received..... 0.000.0014. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00(Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0..00 0.00Political Committees..... 17. Other Federal Receipts 0..00 0.00(Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0,000 0,00(from Schedule H3) 0 0.0 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00(c) Total Transfers (add 18(a) and 18(b)).. 19. Total Receipts (add Lines 11(d), 1,1,6,5,4,9,7 12, 13, 14, 15, 16, 17, and 18(c))....... 20. Total Federal Receipts 1, 1, 6, 5, 4, 9, 7 3, 3, 9, 0, 07

(subtract Line 18(c) from Line 19) ▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal		Calendar rear-to-Date
	Activity (from Schedule H4)		
	(i) Federal Share	0.0.0	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating		
	Expenditures	$\begin{bmatrix} 0.00 \\ 0.00 \end{bmatrix}$	0.00
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00
22.	Transfers to Affiliated/Other Party		
23.	ConmitteesContributions to	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	0.00
	Federal Candidates/Committees and Other Political Committees	0.00	0.00
24.	Independent Expenditures		
25.	(use Schedule E)	0.00	$\begin{bmatrix} 0.00 \end{bmatrix}$
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
			0.00
27. 28.	Loans Made Refunds of Contributions To: (a) Individuals/Persons Other		
	Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	0.00	
	(such as PACs)		
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶		0.00
29.	Other Disbursements	1,1,70,0,00	1, 1, 9, 5, 0, . 00
30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6)		0.00
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add		
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1,1,7,0,0,00	1,1,950.00
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	1 1, 7 0 0 . 00	1 1 0 5 0 00
	from Line 31)	1,700.00	1,1,9,5,0,00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 III. Net Contributions/Operating Ex-COLUMN A COLUMN B **Total This Period** Calendar Year-to-Date penditures 33. Total Contributions (other than loans) (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d))..... 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶ 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures (subtract Line 37 from Line 36)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

				PAGE)F	g"
(check	only or	ne)						
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13		14		15	Г	16	Γ	17

Any information copied from	such Reports and	I Statements may not	be sold or used b	y any person for the	purpose of soliciting	contributions
or for commercial purposes,	, other than using !	the name and address	of any political co	ommittee to solicit a	ontributions from such	committee.
						· · · · · · · · · · · · · · · · · · ·

NAME OF COMMITTEE (In Full)

First Commonwealth	Financial Co	rporation PAC
--------------------	--------------	---------------

_	First Commonwealth Financial Corporation PAC							
Α.	Full Name (Last, First, Middle Initial) Green	Date of Receipt						
	Mailing Address PO Box 400		MAM / DAD / AGANANA					
	City Indiana PA	State Zip Code 15701	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	0.0.0					
	Name of Employer FCFC Board of Directors	Occupation Member						
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼						
В.	Full Name (Last, First, Middle Initial) Answ	ine, Emmanuel J.	Date of Receipt					
	Mailing Address PO Box 400		M-M / [0-0] / [
	City Indiana	State Zip Code PA 15701	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.		0.00					
	Name of Employer FCB	Occupation SVP- Operation Executive						
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2 5 0 0 0						
c.	Full Name (Last, First, Middle Initial) Claus	, Gary R.	Date of Receipt					
	Mailing Address PO Box 400 City	State Zip Code	MUM / DUD / TYYUYUT					
	Indiana	PA 15701	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	0.00					
	Name of Employer FCFC Board of Directors	Occupation Member						
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 3 0 0 . 0 0						
s	UBTOTAL of Receipts This Page (optional)	0.00						
Ţ	OTAL This Period (last page this line number of	only)						

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE & OF 8

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) 11a
Any information copied from such Reports and Statements or for commercial purposes, other than using the name an		rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) First Commonwealth Finan	cial Corporation P	AC
rec in number of contributing federal political committee. Name of Employer FCB Board of Directors Receipt For	Zip Code 15701	Date of Receipt Amount of Each Receipt this Period 0.00
B. Hailing Address PO Box 400	arrie L.	Date of Receipt
City Indiana FEC ID number of contributing federal political committee. Name of Employer FCB Receipt For: Primary General Other (specify) ▼ State PA C C Aggreg	15701 ation lanager pate Year-to-Date ▼	Amount of Each Receipt this Period 0.00
FEC 1D number of contributing federal political committee. Name of Employer FCFC Board of Directors Chair	Zip Code 15701	Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)		0.00

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	;	

Use separate schedule(s)

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ITI	EMIZED RECEIPTS		for each catogory of the Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and S for commercial purposes, other than using the			
$ \rangle$	NAME OF COMMITTEE (In Full) First Commonwealth F	inanci	al Corporation P	AC
A.	Full Name (Last, First, Middle Initial) Zuro,	Matthe	ew T.	Date of Receipt
	Mailing Address PO Box 400			MANN , BAB , TAAAAAA
	City Indiana	State PA	Zip Code 15701	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		0,00
	Name of Employer FCB	Occupation Busines	s Banking Area Mgr- VF	
	Receipt For: Primary General Other (specify)		Year-lo-Dale ▼	
В.	Full Name (Last, First, Middle Initial) Emm	erich, I. Robert		Date of Receipt
	Mailing Address PO Box 400			MAM (DAD) (AAAAAA
	City Indiana	State F	Zip Code PA 15701	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			0,0,0
	Name of Employer FCB	Occupation Chief C	redit Officer	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼	
	Full Name (Last, First, Middle Initial) Capo	e	Date of Receipt	
	Mailing Address PO Box 400			
	City Indiana	State F	Zip Code PA 15701	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		0.0.0
	Name of Employer FCFC Board of Directors	Occupation Membe		
_	Receipt For: Primary General Other (specify) ▼ Aggregate		Year-to-Date ▼	
s	UBTOTAL of Receipts This Page (optional)		>	0,0,0

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only	one)			
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Any information copied from	such Reports and Statem	ents may not be sold or us	sed by any person for the purpos	e of soliciting contributions
			cal committee to solicit contribution	

NAME OF COMMITTEE (In Full)

	<u></u>	
Full Name (Last, First, Middle Initial) Mon	Date of Receipt	
Mailing Address PO Box 400		MGM / DOD / YOVEVE
City Indiana	State Zip Code PA 15701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		0,0,0
Name of Employer FCB	Occupation Business Integration Group Mgr.	
Receipt For: Primary ☐ General Other (specify) ▼	Aggregate Year-to-Date ▼ 4.00,00	
Full Name (Last, First, Middle Initial)	t, Robert E.	Date of Receipt
Mailing Address PO Box 400		MAM (LOAD) (AAAAAA
City Indiana	State Zip Code PA 15701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0.00
Name of Employer FCB	Occupation EVP/CFO & Treasurer	
Receipt For: Primary	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Ven	tura, Robert J.	Date of Receipt
Mailing Address PO Box 400		() () () () () () () () () ()
City Indi a na	State Zip Code PA 15701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0.0,0
Name of Employer FCFC Board of Directors	Occupation Member	
Receipt For: Primary ☐ General Other (specify) ▼	Aggregate Year-to-Date ▼	
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SCHEDULE	Α	(FEC	Form	3X)
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	y information copied from such Reports and Stat for commercial purposes, other than using the n				
7	NAME OF COMMITTEE (In Full)				
<u>/</u>	First Commonwealth Fi	nanci	al Corporation P	AC	
A.	Full Name (Last, First, Middle Initial) Latime	er, Luk	e A.	Date of	Receipt
	Mailing Address PO Box 400			LW V.W	1 600 1 4000
	City Indiana PA	State 157	Zip Code 701	Amount	of Each Receipt this Period
	FEC ID number of contributing federal political committee.		Anoun	0 . 0 . 0 . 0	
	FCFC Board of Directors	Occupation Member			
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify) ▼		250_000		
В.	Full Name (Last, First, Middle Initial) Cobail	n, Ster	ohen	Date of	Receipt
	Mailing Address PO Box 400	M~W) (<u> </u>		
	City Indiana	State PA	Zip Code 15701	Amount	of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			0,0,0
		Occupation EVP- Co	rporate Banking Executiv	e	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify) ▼		<u> </u>		
C.	Full Name (Last, First, Middle Initial) White,	Mega	n A.	Date of	Receipt
	Mailing Address PO Box 400			_MT:-M	\ \(\begin{align*} a
	City Indiana	State PA	Zip Code 15701	Amount	of Each Receipt this Period
	FEC ID number of contributing federal political eommittee.		00,0		
	· -	al Manager- VP			
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify) ▼		, , , , 3,0,0, 0,0		
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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	y information copied from such Reports and Si for commercial purposes, other than using the				or the		pos	se of	soliciting		ntribut	ions
	NAME OF COMMITTEE (ID FUII) First Commonwealth F	inanci	al Corporation P	AC	<u> </u>							
<u> —</u> А.	Full Name (Last, First, Middle Initial) Metえ r	inda D.		Date of	f Re	ece	eipt					
	Mailing Address PO Box 400			M V M] ′		0 1 0		√ ∀	~~~~v~~~v~		
	City Indiana	Zip Code 15701		Amoun	t of	Ea	ach Re	eceipt the	nis F	Period		
	FEC ID number of contributing federal political committee.				-JL	-Jr_		<u>_</u>		9,	9,6	
	Name of Employer FCB	SVP - C	Chief Compliance Office	r					- 12/3 emi-			()
	Receipt For: Primary ■ General Other (specify) ▼		Year-10-Date ▼ 		·							
В.	Full Name (Last, First, Middle Initial) Parzych, Cheryl A.					Date of Receipt						
	Mailing Address PO Box 400				MAN (BAB) (LAAAAAA)							
	City Indiana	Zip Code 15701	_ -	Amoun	t of	Ea	ach Re	eceipt ti	his F	Period	······································	
	FEC ID number of contributing federal political committee.			. [4,8,0			3,0,	0,0			
	Name of Employer FCB	Occupation EVP - V	Vealth Services Mgr.			•			- 12/ emi-		•	/)
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼	(\$40.00 semi-monthly)								
C.	Full Name (Last, First, Middle Initial) Price	, T. Mic	chael		Date o	f Re	ece	eiṗt				
	Mailing Address PO Box 400] ′		в у в		~~ <u>~</u>	_^ _ ~	
	City Indiana	State PA	15701	1					eceipt t			
	FEC ID number of contributing federal political committee.	C					<u> </u>		<u>مریم</u>	<u>3.4</u>	<u>.3.</u>	7 ,5
	Name of Employer FCB	nt			•			- 12/ -emi		•	/)	

SUBTOTAL of Receipts This Page (optional)	1,223,71
TOTAL This Period (last page this line number only)	

5,0,0,0,0

Aggregate Year-to-Date ▼

Receipt For:

Primary

Other (specify)

General

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR	PAGE	1	OF	8			
(chec	k only o	one)		_			
	11a [] 11b		11c		12	
	13	14		15	П	16	□ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

First Commonwealth Financial Corpora	ation	PAC
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V		manda odiporation i		
Α.	Full Name (Last, First, Middle Initial) Boni	Date of Receipt		
	Mailing Address PO Box 400			
	City Indiana	State Zip Code PA 15701	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	1.6.8.0.0	
	Name of Employer FCB	Occupation SVP- Sr. Comity. Real Estate Lender	(7/12/13 - 12/30/13) (\$14.00 semi-monthly)	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼		
В.	Full Name (Last, First, Middle Initial)	y-Roberts, Neil	Date of Receipt	
	Mailing Address PO Box 400	M-W / 000 / 4040404		
	City Indiana	State Zip Code PA 15701	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	1,4,4,00		
	Name of Employer FCB	Occupation SVP- Sr. Middle Market Banker	(7/12/13 - 12/30/13) (\$12.00 semi-monthly)	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼		
<u>с.</u>	Full Name (Last, First, Middle Initial) Lom	bardi, Leonard	Date of Receipt	
	Mailing Address PO Box 400			
	City Indiana	State Zip Code PA 15701		
	FEC ID number of contributing federal political committee.	C		
	Name of Employer FCB	Occupation EVP Chief Audit Executive	(7/12/13 - 12/30/13) (\$16.67 semi-monthly)	
	Receipt For: Primary ■ General Other (specify) ▼	Aggregate Year-to-Date ▼		
١	SUBTOTAL of Receipts This Page (optional)		5,12,04	
۱	OTAL This Period (last page this line numbe	r only)		

SCHEDULE	A	(FEC	Form	3X)
ITEMIZED R	EC	FIPTS	1	

Use separate schedule(s) for each category of the **Detailed Summary Page**

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) First Commonwealth Financial Corporation PAC Full Name (Last, First, Middle Initial) McKee, William R. Date of Receipt Mailing Address PO Box 400 City State Zip Code Indiana PA 15701 Amount of Each Receipt this Period FEC ID number of contributing 1 8 0 0 0 federal political committee. (7/12/13 - 12/30/13) Name of Employer Occupation SVP- Sr. Middle Market Banker (\$15.00 semi-monthly) **FCB** Receipt For: Aggregate Year-to-Date ▼ General Primary 255,00 Other (specify) Full Name (Last, First, Middle Initial) Smith, Steve M. В. Date of Receipt Mailing Address PO Box 400 City State Zip Code Indiana PA 15701 Amount of Each Receipt this Period FEC ID number of contributing 180.00 federal political committee. (7/12/13 - 12/30/13)Name of Employer **FCB** SVP- Facilities Manager (\$15.00 semi-monthly) Receipt For: Aggregate Year-to-Date ▼ General Primary Other (specify) 295,00 Full Name (Last, First, Middle Initial) Ganung, Mark A. Date of Receipt Mailing Address PO Box 400 Zip Code City State Indiana PA 15701 Amount of Each Receipt this Period FEC ID number of contributing 1,4,4,0,0 federal political committee. (7/12/13 - 12/30/13)Name of Employer Occupation **SVP- Wealth Sales Executive FCB** (\$12.00 semi-monthly) Receipt For: Aggregate Year-to-Date ▼ **Primary** General 224.00 Other (specify) 5.04.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDUL	ΕВ	(FEC	Form	3X)
ITEMIZED	DISB	URSE	MENT	S

SCHEDULE B (FEC Form 3X)	Na	FOR LINE I	NUMBER: PAGE 1 OF 2			
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)						
First Commonwealth Financial Corporation PAC						
Full Name (Last, First, Middle Initial)						
1.			Date of Disbursement			
Reed, Dave	····		المحمران (العربوران) المحمران			
Mailing Address			0 7 1 7 2 0 1 3			
PO Box 1440 City S	itate Zip Code					
	PA 15701		•			
Purpose of Disbursement	Tr					
Contribution Candidate Name		0,1,1	Amount of Each Disbursement this Period			
Dave Reed		Category/ Type	1,000.00			
Office Sought: X House Disbursem	nent For:	1 ype	المساليسة والمساليسة المساليسة المساليسة والمساليسة والمساليسة			
_	Primary General	1				
	Other (specify) ▼					
State: PA District: 62						
Full Name (Last, First, Middle Initial)		Date of Disbursement				
White, Don						
Mailing Address	45364		0 7 1 7 2 0 1 3			
Indiana PA	15701					
City S PO Box 363	state Zip Code					
Purpose of Disbursement	In	0'4'4				
Contribution Candidate Name		0 1 1	Amount of Each Disbursement this Period			
Don White	j	Category/ Type	1,20000			
Office Sought: House Disbursem	nent For:	.,,,,				
ا اشا	Primary 🔳 General	ĺ				
	Other (specify) ▼					
State: PA District: 41						
Full Name (Last, First, Middle Initial)			Date of Disbursement			
PABPAC			Landa / Logal / Landand			
Mailing Address 3897 North Front Street PO Box 152 City State Zip Code Harrisburg PA 17110			0 9 1 3 2 0 1 3			
Purpose of Disbursement						
Contribution 0 1 1			Amount of Each Disbursement this Period			
Candidate Name		Category/ Type	8,000,000			
Office Sought: House Disbursen						
<u> </u>	Primary General					
State: District:	Other (specify) ▼					
SUBTOTAL of Disbursements This Page (optional).						
TOTAL This Period (last page this line number only)						

SCHEDULE B (FEC Form 3X)

TEMIZED DISBURSEMENTS		Use separate schedule(s)	FOR LINE I (check only				
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	Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions						
or	for commercial purposes, other than using the name	e and address of any politi	ical committee to	source contributions from such committee.			
\	NAME OF COMMITTEE (In Full)	analal O		240			
_	First Commonwealth Fin	iancial Corpo	ration F	AU			
Α.	Full Name (Last, First, Middle Initial)			Date of Disbursement			
40	Corbett, Tom						
	Mailing Address PO Box 186			1 1 0 6 2 0 1 3			
		State Zip Code					
	Sewickley Purpose of Disbursement	PA 15143					
	Purpose of Disbursement Contribution		0.1.1	Amount of Each Disbursement this Period			
	Candidate Name		Category/				
	Tom Corbett.		Category/ Type	1, 5, 0, 0, 0, 0			
	Office Sought: House Disbursem						
		Primary General					
	State: PA District:	Other (specify) ▼					
	State: PA District: Full Name (Last, First, Middle Initial)						
В.			1	Date of Disbursement			
•				الممممما المممما الممما			
	Mailing Address						
	City	State Zip Code					
	Purpose of Disbursement			.			
	Condidate None			Amount of Each Disbursement this Period			
	Candidate Name		Category/ Type				
	Office Sought: House Disbursem			ı			
	├ ─-	Primary		1			
	State: District:	our (ahenily) ▲		1			
	Full Name (Last, First, Middle Initial)						
C.				Date of Disbursement			
				الممممميا ، العيوم ، السميم			
	Mailing Address			<u> </u>			
	City	State Zip Code					
	Purpose of Disbursement			Amount of Fact District Control of Control			
Candidate Name Category/		Amount of Each Disbursement this Period					
	Office Sought:	and For	Туре				
	Office Sought: House Disbursem	nent For: Primary					
		Other (specify)					
_	State: District:	→					
s	SUBTOTAL of Disbursements This Page (optional)						
	OTAL This Period (last page this line number only).			1,500,00			
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FEDERAL ELECTION COMMISSION

909 CAST Street N.W. WAShington, D.C. 20462

FEC MAIL CENTER

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First Commonwealth.

First Commonwealth Financial Corporation Old Courthouse Square, 22 North Sixth Street, P.O. Box 400 Indiana, PA 15701-0400





















Federal Election Co ENVELOPE REPLACEMENT PAGE FO The FEC added this page to the end of this file	OR INCOMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date Next Business Day Delivery
Received from House Records & Registration	Date of Receipt on Office
Received from Senate Public Records Office	Date of Receipt ee
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
grand the same of	2/4/14
PREPARER	DATE PREPARED

PREPARER (8/2013)